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LLP**



RECEIPT  
#2

April 13, 1999

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**RECEIVED**

APR 27 1999

**Group 3700**

Assistant Commissioner for Patents  
Washington, D.C. 20231

Attention: Application Processing  
Division's Customer Correction Branch

Re: **Karakasoglu et al., U.S. Patent Application No. 09/169,780 for:  
Multi-Channel Self-Contained Apparatus and Method for Diagnosis of  
Sleep Disorders**  
Attorney Docket No. A-65929/HCH

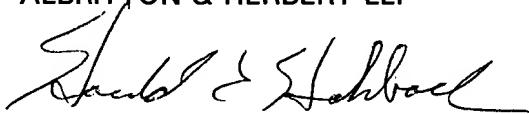
Dear Sir/Madam:

Enclosed herewith is the original filing receipt for the above-captioned application. It is noted that the last name of the first-named inventor was misspelled, as reflected on the executed Declaration for Patent Application (copy enclosed).

Under "Applicant(s)", please delete "KARAKASOQLU" and insert --KARAKASOGLU--. We respectfully request that this be corrected as indicated in red on the enclosed original filing receipt.

Very truly yours,

**FLEHR HOHBACH TEST  
ALBRITTON & HERBERT LLP**



Harold C. Hohbach, Reg. No. 17,757

HCH:cdg 131228  
Enclosures

**CERTIFICATE OF MAILING (37 CFR 1.8(a)(1)(ii)(A))**

I hereby certify that this paper along with any referred to as being attached or enclosed is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on April 13, 1999.

Signed: Claudia Galik  
Claudia Galik

FILING RECEIPT

APR 16 1999



UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office  
ASSISTANT SECRETARY AND COMMISSIONER  
OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/169,780	10/08/98	3737	\$417.00	A-65929/HCH	2	22	2

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Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Connection Branch within 10 days of receipt. Please provide a copy of the filing receipt with the changes noted thereon.

## Applicant(s)

AHMET KARAKASOGLU, SAN FRANCISCO, CA; KARL S. JOHNSON,  
PALO ALTO, CA; JOHN SCOTT ADAMS, LOS GATOS, CA.

FOREIGN FILING LICENSE GRANTED 10/27/98

\* SMALL ENTITY \*

## TITLE

MULTI-CHANNEL SELF-CONTAINED APPARATUS AND METHOD FOR DIAGNOSIS OF  
SLEEP DISORDERS

PRELIMINARY CLASS: 600

LICENSE FOR FOREIGN FILING UNDER  
Title 35, United States Code, Section 184  
Title 37, Code of Federal Regulations, 5.11 & 5.15

GRANTED

The applicant has been granted a license under 35 U.S.C. 184, if the phrase "FOREIGN FILING LICENSE GRANTED" followed by a date appears on the reverse side of this form. Such licenses are issued in all applications where the conditions for issuance of a license have been met, regardless of whether or not a license may be required as set forth in 37 CFR 5.11. The scope and limitations of this license are set forth in 37 CFR 5.15(a) unless an earlier license has been issued under 37 CFR 5.15(b). The license is subject to revocation upon written notification. The date indicated is the effective date of the license, unless an earlier license of similar scope has been granted under 37 CFR 5.13 or 5.14.

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NOT GRANTED

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APR 16 1989

DECLARATION FOR PATENT APPLICATION

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **MULTI-CHANNEL SELF-CONTAINED APPARATUS AND METHOD FOR DIAGNOSIS OF SLEEP DISORDERS**, the specification of which

(check  
one)  is attached hereto.

was filed on \_\_\_\_\_ as  
Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_.

(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Patent Office all information known to me to be material to patentability as defined in 37 C.F.R. 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

<hr/> (Number)	<hr/> (Country)	<hr/> (Day/Month/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>
			Yes	No
<hr/> (Number)	<hr/> (Country)	<hr/> (Day/Month/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>
			Yes	No
<hr/> (Number)	<hr/> (Country)	<hr/> (Day/Month/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>
			Yes	No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose to the Patent Office all information known to me to be material to patentability as defined in 37 C.F.R. 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

<hr/> (Application Serial No.)	<hr/> (Filing Date)	<hr/> (Status) (patented, pending, abandoned)
<hr/> (Application Serial No.)	<hr/> (Filing Date)	<hr/> (Status) (patented, pending, abandoned)
<hr/> (Application Serial No.)	<hr/> (Filing Date)	<hr/> (Status) (patented, pending, abandoned)

Direct all telephone calls to Harold C. Hohbach at (650) 494-8700.

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File No. A-65929/HCH

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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